Dynamic Chiropractic

VITAMINS / SUPPLEMENTS

Lisinopril: Common Drug-Nutrient Interactions

Brandon Blood, DC; Todd Mexico, DC

"Medications, both prescription and over-the-counter, can affect how the body uses nutrients."[1] Stop and think about this statement by Janice Hermann, PhD, from Oklahoma State University. How many patients who present to your clinic are currently consuming either prescription or OTC medications?

Statistically, nearly 50 percent of Americans are currently taking prescription medications[2] – that's one out of every two patients who walks into your office.

For some of us, this does not necessarily affect our day-to-day patient care. But for those of us who feel that our patients should leave our office with a bottle of magnesium, fish oil or any other nutritional supplement, knowing this information becomes vital. Many of us need to do a better job understanding that drug-nutrient interactions do actually exist and can be detrimental to us and our patients if not appropriately considered.

As we continue our educational series on the importance of understanding drug-nutrient interactions, let's look at the medication lisinopril [brand names: Prinivil, Zestril]. According to Forbes.com, lisinopril, an ACE-inhibitor prescribed for the treatment of hypertension, was the third most prescribed medication in 2010, prescribed over 81 million times.[3] So, being that half of our patients are walking into our clinics on medication, the likelihood of them being on this particular medication is high.

Potential Supplement Interactions With Lisinopril

Here are a few of the more common positive *and* negative drug-nutrient interactions involving lisinopril:

Negative

- Potassium: Consuming potassium while taking lisinopril may increase the risk of hyperkalemia.[4-9]
- Arginine: Supplementation with arginine while taking lisinopril may alter potassium levels.[9]

Positive

- Zinc: Consuming zinc while on lisinopril may help combat drug-induced depletion of this mineral.[10-11]
- Iron: Iron supplementation concurrent with lisinopril use may help alleviate the undesired side effect of a dry cough. (Iron should be taken with caution, as it may also decrease drug absorption.)[12-13]

The findings above are not inclusive of the potential drug-nutrient interactions involving lisinopril; they are just a sample of the information that has been researched. It is important for doctors of chiropractic to analyze *all* of the medications and nutritional supplements their patients are taking to assess the possible beneficial and negative interactions. It is perhaps equally important to document these results in a manner that exhibits due diligence on the part of the observing DC from a medical-legal standpoint. By understanding this research and applying your nutritional knowledge in practice, you will likely also see an increase in patient confidence in you and the care you provide.

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MAY 2011

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